Cervicogenic headache: criteria, classification and epidemiology.

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Language: English

Publication Type: Article

Keywords: Headache Disorders - classification - diagnosis - epidemiology
Humans
Norway
Prevalence
Terminology as Topic

Abstract: The concept that headache might stem from the neck is old. The term "cervicogenic headache" was coined in 1983. A new content was then given to this concept: cervicogenic headache (CEH) is in principle a unilateral headache, generally starting in the neck and "spreading" forwards. A strict unilaterality--that is, absolutely no pain on the opposite side--is rather rare. Unilaterality in this context is defined as follows: the headache dominates on one side. When weak, the pain may be only on that side; when severe, it may also be felt on the contralateral side, but to a lesser extent. It never dominates on the contralateral side. These special features of CEH cannot be emphasised strongly enough. There are signs pertaining to the neck, such as reduced range of motion in the neck, mechanical precipitation mechanisms and ipsilateral shoulder/arm sensation (or even pain). Migraine without aura symptoms are less prominent than in migraine.

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The factors associated with neck pain and its related disability in the Saskatchewan population.

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Date: May-1-2000

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Publication Type: Article
To identify factors associated with neck pain and its related disability in Saskatchewan adults.
Little is known about the etiology of neck pain and its related disability. Previous cross-sectional population-based studies have suggested that neck pain may be associated with age, female gender, lower socioeconomic status, physically demanding work, and other comorbidities.
The Saskatchewan Health and Back Pain Survey was mailed to 2184 randomly selected Saskatchewan adults 20 to 69 years of age. Fifty-five percent of the study population participated. The survey collected demographic, socioeconomic, and health-related information. Neck pain and its related disability was classified into four categories using the Chronic Pain Questionnaire: no neck pain (Grade 0), low intensity/low disability neck pain (Grade I), high intensity/low disability neck pain (Grade II), and high disability neck pain (Grades III-IV). Polytomous logistic regression was used to identify associations between demographic, socioeconomic, and health-related variables and various grades of neck pain severity.
Of the 1131 respondents, 54% had experienced neck pain at some point in the 6 months before the survey, and almost 5% were highly disabled by neck pain. The prevalence of Grade I neck pain was lower in individuals with low education attainment, but higher for those reporting headaches, low back pain, better general health, and a history of neck injury resulting from a motor vehicle collision, some of whom may have received compensation for their injury. Grade II neck pain was strongly associated with headache, low back pain, and a history of neck injury during a motor vehicle collision and weakly associated with digestive disorders and current cigarette smoking. Grades III-IV neck pain was strongly associated with low back pain, headaches, cardiovascular disorders, digestive disorders, and a history of neck injury during a motor vehicle collision.
This study suggests that important associations exist between comorbidities, a past history of neck injury resulting from a motor vehicle collision, and graded neck pain. Importantly, individuals who are significantly disabled by neck pain also have comorbidities that have a moderate or severe impact on their health, suggesting that chronic disorders tend to cluster in some individuals.
Prevalence of headache in schoolchildren: relation to family and school factors.

Author: J. Carlsson
Author Affiliation: Department of Clinical Neuroscience, Sahlgrenska Hospital, Göteborg, Sweden.
Date: Jun-1996
Language: English
Publication Type: Article
Keywords: Adolescent
Age Distribution
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Family Characteristics
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Headache - epidemiology - etiology
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Male
Population Surveillance
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Questionnaires
Recurrence
Research Support, Non-U.S. Gov't
Risk factors
Schools
Sex Distribution
Socioeconomic Factors
Sweden - epidemiology
Urban health

Abstract: The purpose of the study was to determine the prevalence of recurrent headaches among schoolchildren in Göteborg and the relation of headache to school and family variables. A stratified sample of 1297 pupils was selected to be representative of the Göteborg population. Data were obtained by means of questionnaires. Twenty-six per cent had "headache once a month or more" and 6% had "headache several times a week or daily" (frequent headache). There was a gradual increase of headache with age. In the third grade there was a marked increase of frequent headache. In the highest school level (grades 7-9), girls had significantly more headache than boys. In the lower school level (grades 1-3), a greater number of pupils in the class increases the risk of frequent headache. Pupils in the intermediate school level (grades 4-6) reported more frequent headache in districts with high unemployment. It is concluded that headache among schoolchildren is a health problem which merits increased attention.

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Date: Jun-1996

Language: English

Publication Type: Article

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Cross-Sectional Studies
Family - psychology
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Headache - epidemiology - psychology
Humans
Male
Middle Aged
Neck Pain - epidemiology - psychology
Norway - epidemiology
Pain - epidemiology - psychology
Population Surveillance
Questionnaires
Rural Health
Sex Distribution
Shoulder
Sick Role

Abstract: OBJECTIVE: To explore the gender difference in reporting headache and neck or shoulder pain, we analysed the association between reported own headache and reporting the same complaints among first grade relatives. Based on these associations we discuss 'learning' of illnesses within the family structures. METHOD: A cross-sectional study based on a self-administered postal questionnaire of musculoskeletal complaints in the total population aged 20-70 years was carried out. A population based study was conducted in the municipality of Bardu, northern Norway. A total population of men and women aged 20-70, altogether 2409 people, were sent a questionnaire. After one postal reminder 1939 questionnaires were returned, a response rate of 80.5%. The return rate was slightly higher among the eldest. The sex distribution was the same in both the responders and the non-responders. RESULTS: The females in the family and the brothers and sisters were the main family members imprinting the way in which the children were deciphering symptoms like headache and neck or shoulder pain later in life. These illnesses were changed to a very little extent by the impact from the spouse.

PubMed ID: 8671132 View in PubMed
Headache epidemiology. Emphasis on migraine.

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Publication Type: Article

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Headache - classification - epidemiology
Health Services - utilization
Humans
Incidence
Male
Middle Aged
Migraine Disorders - classification - diagnosis - economics - epidemiology
Patient Selection
Prevalence
Prognosis
Sex Distribution
Socioeconomic Factors
Tension-Type Headache - classification - diagnosis - economics - epidemiology
United States - epidemiology
World Health

Abstract: Through the use of IHS criteria, large population-based epidemiologic studies in Denmark, the United States, France, Canada, and elsewhere have shed light on the descriptive epidemiology of migraine. Although migraine is a remarkably common cause of temporary disability, many migraineurs, even those with disabling headache, have never consulted a physician for the problem. Prevalence is highest in women, in persons between the ages of 25 and 55, and, at least in the United States, in individuals from low income households. Nonetheless, it occurs with high prevalence outside these groups at highest risk. The prevalence of migraine may be increasing in the United States, but this is uncertain. Longitudinal studies are required to better determine the incidence and natural history of migraine, as well as the life course of comorbid conditions.

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Psychosocial functioning in schoolchildren with recurrent headaches.

Author: J. Carlsson
Author Affiliation: Department of Clinical Neuroscience, University of Göteborg, Sweden.
Source: Headache. 1996 Feb;36(2):77-82
Date: Feb-1996
Language: English
Publication Type: Article
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Depression
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Headache - classification - complications - psychology
Humans
Male
Migraine Disorders - complications - psychology
Recurrence
Research Support, Non-U.S. Gov't
Severity of Illness Index
Stress, Psychological
Students - psychology
Sweden
Tension-Type Headache - complications - psychology

Abstract: The psychosocial functioning of 113 schoolchildren (8 to 15 years old) reporting headaches at least once a month was compared to a group of headache-free control subjects matched for sex and age. Thirteen percent of the headache sufferers had migraine headaches, 28% had episodic tension-type headaches, 30% had chronic tension-type headaches, and 29% had migraine coexisting with tension-type headaches. Overall, the headache sufferers experienced more somatic complaints, stress, and psychological symptoms, in addition to being absent from school (due to illness), more often and reported fewer caring persons as compared to headache-free controls. Although few differences between the four headache groups emerged in the children's psychosocial functioning levels, children with migraine coexisting with tension-type headaches had significantly more frequent somatic complaints than those having episodic tension-type headaches. In addition, children with migraine or migraine coexisting with tension-type headaches were more often absent from school than those having tension-type headaches only. A significant but weak relationship between children's headache severity and their somatic complaints was noted.

PubMed ID: 8742678 View in PubMed

A 10-year follow-up study of tick-borne encephalitis in the Stockholm area and a review of the
143 people treated for tick-borne encephalitis (TBE) were included in a retrospective follow-up study. Sequelae and epidemiological characteristics in 114 individuals were analysed. The case fatality rate and the prevalence of residual paresis were low, 1.4 and 2.7%, respectively. However, 40 (35.7%) individuals were found to have a postencephalitic syndrome after a median follow-up time of 47 months, and a majority (77.5%) of these were classified as moderate to severe. Various mental disorders, balance and co-ordination disorders and headache were the most frequently reported symptoms. Increasing age was correlated to a longer duration of hospital stay, longer convalescence and increased risk of permanent sequelae. Results from a neuropsychiatric questionnaire showed marked differences between the subjects with sequelae compared to controls. 57% had noticed a tick bite before admission, and 48% were aware of at least one person in their environment who previously had contracted TBE. 79% were permanent residents or visited endemic areas often and regularly. In conclusion, we have found that TBE in the Stockholm area has a low case fatality rate, but gives rise to a considerable number of different neurological and mental sequelae, which justifies vaccination of a defined risk population in endemic areas.
Cluster headache is an autosomal dominantly inherited disorder in some families: a complex segregation analysis.

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Date: Dec-1995

Language: English

Publication Type: Article

Keywords: Adolescent
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Aged
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Chromosome Aberrations - genetics
Chromosome Disorders
Cluster Headache - genetics
Female
Genes, Dominant - genetics
Genetic Diseases, Inborn - genetics
Humans
Infant
Male
Middle Aged
Research Support, Non-U.S. Gov't

Abstract: We investigated the mode of inheritance of cluster headache in 370 families. The probands were from a neurological clinic in Jutland and two departments of neurology in Copenhagen County, Denmark. The criteria of the International Headache Society were used. The patterns of segregation of cluster headache were assessed by complex segregation analysis performed with the computer program POINTER. Of the 370 probands with cluster headache, 25 had 36 relatives with cluster headache. The segregation analysis suggests that cluster headache has an autosomal dominant gene (p

PubMed ID: 8825923 View in PubMed
Development of stomach-ache and headache during middle childhood: co-occurrence and psychosocial risk factors.

Abstract: Development of somatic symptoms and associations with psychosocial risk factors were investigated in a longitudinal study of Norwegian children aged 4-10 years. Complaints of stomach-ache only were associated with emotionally well-adapted children, and mothers with low education and high emotional support. Children complaining of headache only behaved well as preschoolers, showed a tendency towards high achievement motivation at school and their mothers were employed outside the home. Children with the co-occurrence syndrome seemed to constitute a separate entity. They differed from the others as the syndrome was associated with previous behavioural and emotional problems, current emotional disturbances and mothers with less support. Family demographic stability, further child health problems and school factors were not associated with the co-occurrence syndrome.
Musculoskeletal pain is exceedingly common in young adults. With the aim of studying these symptoms in schoolchildren, a questionnaire survey was carried out among children 8, 11, 13 and 17 years old. The prevalence of back pain and headaches in 1,245 schoolchildren was studied. Twenty-nine per cent of the students reported back pain and 48% headache. In all age groups studied, both back pain and headaches were more common among girls than boys. Girls also reported more frequent symptoms than boys. In a longitudinal study 471 schoolchildren were asked a second time 2 years later. Nine per cent reported back pain and 30% headache in both surveys. Five per cent reported both back pain and headache on both occasions. Despite the reported symptoms most of the pupils did not report health problems. However, pupils with reported pain on both occasions may constitute a risk group for future chronic pain. There were statistically significant relationships between social, psychological and emotional factors and reported symptoms. No relationship between physical factors and reported symptoms were noted. The observed relationships are not proof of causal relations but did indicate areas of problems which make interventions targeting pupils at risk an appropriate measure.